

DEPARTMENT OF TRANSPORTATION
DIVISION OF MOTOR VEHICLES
BUILDING 3, CAPITOL COMPLEX
CHARLESTON, WEST VIRGINIA 25317

VEHICLE TITLE NO.
M B _____
WATERCRAFT TITLE NO.

AFFIDAVIT OF DUPLICATE TITLE FOR A VEHICLE OR WATERCRAFT

TYPE OR PRINT IN BLUE OR BLACK INK
ENCLOSE COPY OF REGISTRATION CARD IF AVAILABLE
IF LOST TITLE SHOWED A LIEN RELEASE, SECTION 3 MUST BE COMPLETED

***THIS APPLICATION MUST BE ACCOMPANIED BY A COPY OF THE OWNER'S DRIVERS LICENSE**

SECTION 1: DUPLICATE TITLE INFORMATION FOR A VEHICLE OR WATERCRAFT
STATE REASON FOR REQUESTING DUPLICATE: (Check One) THE ORIGINAL WAS:

____ LOST ____ DESTROYED ____ NEVER RECEIVED ____ DEFACED *Attach Defaced Title

MAKE	YEAR	BODY STYLE/HULL MATERIAL	VIN OR HULL (SERIAL NO.)	PLATE/REG. NO.
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NAME OF APPLICANT: (To be printed or typed)

ADDRESS:

SECTION 2: OWNER/APPLICANT

The undersigned applicant, being duly sworn upon his oath, deposes and says he is the owner of the vehicle/watercraft described herein:

I, the undersigned, swear or affirm the the information we have entered on this form is correct, I understand that making a false statement on this form may constitute the crime of perjury. Furthermore, I agree to indemnify and hold harmless, the West Virginia Division of Motor Vehicles from any liability arising from this transaction.

Penalty for false statement in this application - a fine of not more than \$100.00 or imprisonment in the county jail for thirty days, or both. If the title reads "AND," both signatures of owners must appear. If signing for a company, indicate your title or position:

APPLICATION MUST BE SIGNED BY OWNER(S)

*1) (x) _____

*2) (x) _____

***THIS APPLICATION MUST BE ACCOMPANIED BY A COPY OF THE OWNER'S DRIVERS LICENSE**

***IF PERSON OTHER THAN APPLICANT IS SIGNING APPLICATION, POWER OF ATTORNEY IS REQUIRED.**

SECTION 3: DISCHARGE OF LIENHOLDER(S)

NOTE: If the vehicle/watercraft has EVER had a lien against it, Section 3 MUST be completed by the lienholder before a clear title can be issued. If Section 3 is not completed, the title will be mailed directly to the lienholder.

The undersigned, being a duly authorized agent for the lienholder, deposes upon his oath and says that the lien is discharged and the lienholder has no interest in the above vehicle/watercraft.

NAME OF LIENHOLDER: _____

ADDRESS: _____

SIGNATURE OF OFFICER: _____ TITLE: _____

THIS LIEN FULLY PAID, SATISFIED, AND RELEASED THIS _____ DAY OF _____, 20 _____

SIGNATURE OF NOTARY: _____ COMMISSION EXPIRATION DATE: _____

SECTION 4: RELEASE AFFIDAVIT

I _____ hereby authorize _____
Vehicle Owner Name of Dealership, lienholder or individual

to receive my duplicate title. (X) _____
Owner's Signature

FOR DIVISION USE ONLY
OK COMPUTER

BY

MAKE CHECKS PAYABLE TO
DIVISION OF MOTOR VEHICLES
DUPLICATE TITLE FEE: \$10.00

FOR DIVISION USE ONLY